



ICON REALTY MANAGEMENT, LLC
 419 Lafayette Street
 5th Floor
 New York, New York 10003
 tel 212.661.2700
 fax 212.661.2333

APPLICATION FOR RETAIL SPACE

Building Address _____
 Term of Lease _____ Lease to Start ___/___/___ To End ___/___/___
 Monthly Rent \$ _____ Security \$ _____ Prepaid Rent \$ _____

Company Name _____ Tax ID # _____
 Address _____
 Phone (____) _____ Fax (____) _____
 Type of Business _____ Website _____
 Description of Business _____
 Date of Incorporation _____ State of Incorporation _____
 Annual Revenue _____ Annual Expenses _____
 Assets _____ Liabilities _____
 Loans Outstanding _____ Total Monthly Payment _____
 Own or Rent Other Property? _____ Address _____
 Attorney's Name _____ Phone # (____) _____
 Attorney's Address _____

Banking Reference # 1 _____ Phone # (____) _____
 Contact at Bank _____ Branch _____ Ckg/Svg _____
 Banking Reference # 2 _____ Phone # (____) _____
 Contact at Bank _____ Branch _____ Ckg/Svg _____
 Vendor Reference # 1 _____ Phone # (____) _____
 Vendor Reference # 2 _____ Phone # (____) _____
 Accountant's Name _____ Phone # (____) _____
 Accountant's Address _____

Principal's Name _____ Sex (M) _____ (F) _____
 Spouse Name _____ Age(s) of Children _____
 Current Address _____
 Current Phone # Home (____) _____ Office (____) _____
 Cellular # (____) _____ E-mail Address _____
 Social Security # _____ - _____ - _____ Date of Birth ___/___/___
 Driver License # _____ State of Issue _____
 Current Landlord's Name _____
 Landlord's Address _____ Phone (____) _____
 Current Monthly Rent Paid \$ _____ Length of Residency _____



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Are you a U.S. Citizen? _____ IF NOT, Please Provide the Following Information...

Country of Citizenship _____ Passport # _____

Do You Have a VISA? _____ # _____ Expiration Date ____/____/____

Do You Have a GREEN CARD? _____ # _____ Exp. Date ____/____/____

I hereby grant the above landlord and its designee, landlord protect, inc., a credit reporting agency, the right to process this credit application for the purpose of obtaining a rental lease. In compliance with the fair credit reporting act, this notice is to inform you that the processing of this application includes but is not limited to making inquiries deemed necessary to verify the accuracy of the information herein, including procuring consumer reports from consumer reporting agencies, obtaining credit information from other credit institutions and criminal background checks from appropriate law enforcement agencies. You have the right to make a written request within a reasonable period of time to receive additional information about the nature of this investigation. The undersigned agrees that this application shall remain the property of the apartment complex, landlord or realtor regardless if rental lease is granted.

Please submit your application with the following: Photo ID, Corporate financial statements (Balance Sheet, Income Statement, Cash Flow Statement), 2 – 3 years of personal & corporate tax returns, personal & corporate bank statements, reference letters (if requested by Landlord)

Signature _____ Date _____